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I hereby certify that the attached RCE Transmittal (2 pages), Response to the Final Office Action dated May 20, 2005 and the Advisory Action dated September 7, 2005 (12 pages) and PTO Form 2038 authorizing credit card payment of \$1,240.00 for the RCE filing (\$790.00) and two-month extension (\$450.00) fees (1 page) are being transmitted to the United States Patent and Trademark Office via facsimile number (571) 273-8300 on the date shown below. (Total number of pages transmitted is 15, including this one).


Stormi R. Davis

Date: October 20, 2005

RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2812PATENT APPLICATION
Doc. No.: 9898-332
Client Ref. No.: SS-18797-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Cheol-Ju YUN

Serial No.: 10/774,081 Examiner: Gurley, Lynne Ann
Filed: February 5, 2004 Group Art Unit: 2812
Confirmation No.: 7130

For: SEMICONDUCTOR DEVICE AND METHOD FOR FORMING
SAME USING MULTI-LAYERED HARD MASK

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the
above-identified application.

1. Submission required under 37 C.F.R. § 1.114

a. ☐ Previously submitted:b. ☒ Enclosed is:☒ Amendment/Reply

10/21/2005 MBINAS 00000038 10774081

01 FC:1801
02 FC:1252790.00 OP
450.00 OP

2. Miscellaneous

3. Fees: (Note: The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed)

- ☒ RCE fee required under 37 C.F.R. § 1.17(e)
- ☐ \$395 small entity
- ☒ \$790 large entity

(Large entity)

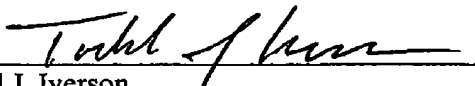
CLAIMS AS AMENDED					
For:	Number After Amendment	Previous Number	Extra	Rate	Additional Fee
Total Claims	20	20	0	x \$50 =	\$0
Independent Claims	3	3	0	x \$200 =	\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

- ☒ Extension of time fee (37 C.F.R. §§1.136 and 1.17)
- | | | |
|---|--------------------------------|---|
| | small entity | large entity |
| <input type="checkbox"/> Extension of Time - 1 st | <input type="checkbox"/> \$60 | <input type="checkbox"/> \$120 |
| <input checked="" type="checkbox"/> Extension of Time - 2 nd | <input type="checkbox"/> \$225 | <input checked="" type="checkbox"/> \$450 |
| <input type="checkbox"/> Extension of Time - 3 rd | <input type="checkbox"/> \$510 | <input type="checkbox"/> \$1020 |
- ☐ Suspension of application fee (37 C.F.R. § 1.17(i))--\$130
- ☒ PTO Form 2038 authorizing credit card payment is attached.
- ☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703.

Customer No. 20575

Respectfully submitted,

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